

DO/ED BIBLIOGRAPHIC DATA ENTRY

SERIAL NUMBER:	09 / 581332	RECEIPT DATE:	06 / 09 / 00
IA NUMBER:	PCT/ FR98 / 02730	IA FILING DATE:	12 / 15 / 98
FAMILY NAME:	CHEVREAU	DELAY WAIVED (Y/N):	Y
GIVEN NAME:	SYLVAIN	DEMAND RECEIVED (Y/N):	Y
PRIORITY CLAIMED (Y/N):	Y	PRIORITY DATE:	12 / 17 / 97
NO BASIC FEE (Y/N):	N	US DESIGNATED ONLY (Y/N):	N
ATTORNEY DOCKET NUMBER:	RCA90215	COUNTRY:	
CORRESPONDENCE NAME/ADDRESS: CUSTOMER NUMBER: 000000		TELEPHONE	0000000000
FAX			
NAME:	JOSEPH TRIPOLI THOMASON MULTIMEDIA LICENSING INC		
STREET:	PO BOX 5312 2 INDEPENDENCE WAY		
CITY:	PRINTON		
STATE/COUNTRY:	NJ	ZIP:	085435312
EMAIL:			
APPLICATION TITLES:	DEVICE FOR AUTHENTICATING DIGITAL IMAGES		

TAB TO LAST POSITION, PUSH SEND